S	CHEDULE B (FEC Form 3)	Use seperate schedule(s) for each category of the	FOR LINE	FOR LINE NUMBER: PAGE 43 / 44		
ΙT	EMIZED DISBURSEMENTS		(check only		🗖	
		Detailed Summary Page	-		19a   19b 20c   X 21	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions						
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee						
$\rangle$	NAME OF COMMITTEE (In Full) Istook Congressional Campaign					
Δ.	Full Name (Last, First, Middle Initial)  First Freedoms Fund PAC			Transaction ID: B-E-22208		
•				Date of Disbursement    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y		
	Mailing Address 1735 New York Avenue NW Suite 500			10 12	2004	
		State Zip Code DC 20006-5221		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement			Refund or Disposal of Excess Contributions Required Under		
	Excess Campaign Funds					
	Candidate Name		Category/ Type	11 C.F.R. 400.53		
	Office Sought: House Disburser					
	Senate President	Primary X General Other (specify) ▼				
	State: District:	outer (opeony)				
2	Full Name (Last, First, Middle Initial)			Transaction ID: B-E		
<b>.</b>	Kobach for Senate			Date of Disbursemen		
	Mailing Address PO Box 12224	10 12	2004			
	,	State Zip Code KS 66282-2224		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement		Refund or Disposal of Excess Contributions Required Under			
	Excess Campaign Funds				011	
	Candidate Name		Category/ Type	11 C.F.R. 400.53		
	Office Sought: House Disburse					
	Senate   President	Primary X General Other (specify) ▼				
	State: District:					
2.	Full Name (Last, First, Middle Initial)  Nethercutt for Senate			Transaction ID: B-E-21907 Date of Disbursement  10		
	Mailing Address 101 Constitution Avenue NW Suite 525 East			10 12	2004	
		State Zip Code DC 20001		Amount of Each Disb	ursement this Period	
	Purpose of Disbursement				1000.00	
	Excess Campaign Funds Candidate Name	011 Category/	Refund or Disposal of Excess Contributions Required Under			
	Туре			11 C.F.R. 400.53		
	Office Sought: House Disburser Senate	ment For: 2004 Primary X General				
	President	Other (specify)				
	State: District:					
SUBTOTAL of Disbursements This Page (optional)						
Т	TOTAL This Period (last page this line number only)					